

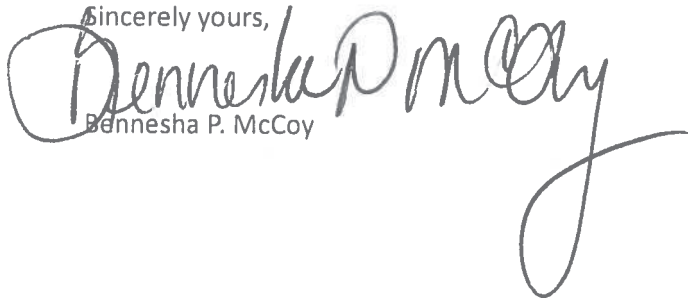
Bennesha P McCoy  
319 Lafayette St  
Bristol PA 190007  
609-772-0305  
Case Number# 23-10778-mdc

8/10/2023

Good morning,

I Bennesha McCoy am submitting these documents as an amendment per the trustee Christine Huber. I provided all documents to Mrs. Hubert that was requested, and it's been a nightmare. She stated that I needed to submit an amendment. So, I am sending the requested amendment. Schedule A/B, Schedule D, Schedule I and Schedule J. I pray that does not affect my hearing for 9/19/2023.

Sincerely yours,

  
Bennesha P. McCoy

AUG 14 2023

Debtor 1 **BENNESHA MCCOY**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_

Case number \_\_\_\_\_  
(If known)

ALLG 14 2023

~~12/15~~

### Part 1: List All of Your PRIORITY Unsecured Claims

- ☒
- Yes.

- (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

## 2.1

Number	Street
--------	--------

When was the debt incurred? 04/22/2018

☐ Yes

☒ Other, Specify **CREDIT CARD**

## 2.2

Number	Street
--------	--------

When was the debt incurred? 05/06/2021

☐ Yes

 Disputed

☒ Other, Specify CREDIT CARD

Debtor 1 **BENNESHA MCCOY**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim Priority amount Nonpriority amount

<input type="checkbox"/> <b>MERRICK BANK</b> <small>Priority Creditor's Name</small> <b>10705 S JORDAN GATEWAY #200</b> <small>Number Street</small>	Last 4 digits of account number <u>7 6 5 8</u> When was the debt incurred? <u>12/08/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,500.00</u> \$ _____ \$ _____
<b>SOUTH JORDAN UT 84095</b> <small>City State ZIP Code</small>	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify _____

<input type="checkbox"/> <b>COMENITY BANK/VICTORIA SEC</b> <small>Priority Creditor's Name</small> <b>P O BOX 182789</b> <small>Number Street</small>	Last 4 digits of account number <u>6 8 7 2</u> When was the debt incurred? <u>07/01/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>262.00</u> \$ _____ \$ _____
<b>COLUMBUS OH 43218</b> <small>City State ZIP Code</small>	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>

<input type="checkbox"/> <b>CAPITAL ONE</b> <small>Priority Creditor's Name</small> <b>P O BOX 31293</b> <small>Number Street</small>	Last 4 digits of account number <u>4 2 0 7</u> When was the debt incurred? <u>02/18/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,267.00</u> \$ _____ \$ _____
<b>SALT LAKE CITY UT 84131</b> <small>City State ZIP Code</small>	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>

Debtor 1 **BENNESHA MCCOY**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	<b>CAPITAL ONE</b> <small>Nonpriority Creditor's Name</small> <b>P O BOX 31293</b> <small>Number Street</small> <b>SALT LAKE CITY UT 84131</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>9 4 8 6</u> When was the debt incurred? <u>06/12/2017</u>	\$ 1,200.00
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>	
4.2	<b>COMENITY BANK/EXPRESS</b> <small>Nonpriority Creditor's Name</small> <b>P O BOX 182789</b> <small>Number Street</small> <b>COLUMBUS OH 43218</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>0 0 6 5</u> When was the debt incurred? <u>05/03/2017</u>	\$ 600.00
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>	
4.3	<b>NORDSTROM/TD BANK</b> <small>Nonpriority Creditor's Name</small> <b>13531 E CALEY AVE SERVICE</b> <small>Number Street</small> <b>ENGLEWOOD CO 80111</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>8 6 4 4</u> When was the debt incurred? <u>10/13/2021</u>	\$ 500.00
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>	

Debtor 1 **BENNESHA MCCOY**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>4.4</span> <span>TD BANK/TARGET</span> </div> <div style="font-size: small;">Nonpriority Creditor's Name</div> <div>7000 TARGET PKWY N MAILSTOP NCD 0450</div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>Number Street BROOKLYN PARK</div> <div>MN</div> <div>55445</div> </div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div style="margin-top: 5px;"> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> </div>	<div style="display: flex; justify-content: space-between;"> <div> <p>Last 4 digits of account number <u>0 9 2 5</u></p> <p>When was the debt incurred? <u>01/13/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u></p> </div> <div style="text-align: right;"> <p>\$ <u>1,000.00</u></p> </div> </div>
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<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>4.5</span> <span>NAVY FEDERAL CU</span> </div> <div style="font-size: small;">Nonpriority Creditor's Name</div> <div>ONE SECURITY PLACE P O BOX 161006</div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>Number Street MERRIFIELD</div> <div>VA</div> <div>22119</div> </div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div style="margin-top: 5px;"> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> </div>	<div style="display: flex; justify-content: space-between;"> <div> <p>Last 4 digits of account number <u>X X 9 0</u></p> <p>When was the debt incurred? <u>10/20/2020</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u></p> </div> <div style="text-align: right;"> <p>\$ <u>2,000.00</u></p> </div> </div>
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<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> <span>4.6</span> <span>COMENITY CAPITAL/ FOREVER 21</span> </div> <div style="font-size: small;">Nonpriority Creditor's Name</div> <div>P O BOX 182120</div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>Number Street COLUMBUS</div> <div>OH</div> <div>43218</div> </div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div style="margin-top: 5px;"> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> </div>	<div style="display: flex; justify-content: space-between;"> <div> <p>Last 4 digits of account number <u>9 5 0 4</u></p> <p>When was the debt incurred? <u>02/26/2020</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u></p> </div> <div style="text-align: right;"> <p>\$ <u>207.00</u></p> </div> </div>
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Debtor 1

First Name Middle Name Last Name

Case number (if known)

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

**SYNCB/AT HOME**

Nonpriority Creditor's Name

P O BOX 965013/4125 WINDWARD PLZ

Number Street

ORLANDO

FL

32896

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number 6 5 0 8

\$ 300.00

When was the debt incurred? 03/03/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify CREDIT CARD

**LENDING CLUB BANK**

Nonpriority Creditor's Name

595 MARKET ST, SUITE 200

Number Street

SAN FRANCISCO

CA

94105

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number 9 8 6 6

\$ 10,000.00

When was the debt incurred? 02/01/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify PERSONAL LOAN

**MERRICK BANK CORP**

Nonpriority Creditor's Name

P O BOX 9201

Number Street

OLD BETHPAGE

NY

11804

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number 2 5 3 9

\$ 1,600.00

When was the debt incurred? 12/08/2020

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify CREDIT CARD



Debtor 1 **BENNESHA MCCOY**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<input type="checkbox"/> <b>NAVY FEDERAL CU</b> <small>Nonpriority Creditor's Name</small> <b>P O BOX 3700</b> <small>Number Street</small> <b>MERRIFIELD VA 22119</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>9 5 5 0</u> When was the debt incurred? <u>10/20/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>500.00</u>

<input type="checkbox"/> <b>NAVY FEDERAL CU</b> <small>Nonpriority Creditor's Name</small> <b>P O BOX 3700</b> <small>Number Street</small> <b>MERRIFIELD VA 22119</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>0 0 1 5</u> When was the debt incurred? <u>12/02/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>AUTO LOAN</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>26,000.00</u>

<input type="checkbox"/> <b>SYNCH/PPC</b> <small>Nonpriority Creditor's Name</small> <b>P O BOX 530975</b> <small>Number Street</small> <b>ORLANDO FL 32896</b> <small>City State ZIP Code</small>	Last 4 digits of account number <u>4 4 1 9</u> When was the debt incurred? <u>05/06/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>LOAN</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>2,700.00</u>